ITD 33A Rev. 06/09

VDOT Employee Witness

VIRGINIA DEPARTMENT OF TRANSPORTATION NON-DISCLOSURE AND SECURITY AGREEMENT

Rev. 06/09	NON-DISCLOSURE AN	D SECURITY AGREEMENT	
I,	, an empty DOT), acknowledge that I have ac	ployee, contractor, or consultant of the cess to information and data of VDOT	Commonwealth of Virginia and the Commonwealth of
	tion, data, systems, hardware, and f	s which I use in the course of performir facilities used to conduct the business o	
Although I have access to VDOT and COV information and data, I shall not read or access information and data that is not needed to perform my job. I shall not disclose or otherwise make available, in whole or in part, VDOT or COV information and data other than to other employees, contractors, or consultants of VDOT or COV to whom such disclosure is authorized, except as provided by law. Information and data may be provided to potential contractors and consultants and to local, state, and federal government bodies to whom such disclosure is authorized, except as provided by law. Such disclosures shall be in confidence for purposes specifically related to the business of VDOT and COV. All Freedom of Information Act (FOIA) requests shall be fulfilled in accordance with the <i>Code of Virginia</i> .			
responsibility to change my pass	sword immediately and to notify my	eel that my password has been comprory manager and VDOT Information Sectee to report it to my manager and VDO	urity Team of the incident. If
for official business only, and an Electronic Communications Sys	re not for personal use except as per stems. I agree that VDOT and COV	OT or COV are considered the property mitted by DHRM Policy Number 1.75 reserve the right to monitor, access, an should have no expectation of privacy.	- Use of the Internet and and disclose at their discretion any
VDOT and COV information, d	ata, systems, hardware, and facilitie	at or otherwise, to ensure the protection es. I will perform my duties with qualit standards, procedures, and guidelines.	
	respect to the confidentiality and se elationship, or employment with VI	ecurity of all information and data discl	osed to me shall survive the
I shall immediately report all sec	curity violations or suspected securi	ity violations to my manager and VDO	Γ Information Security Team.
I have read and shall comply wi - Use of the Internet and Electro		echnology Security Program Manual a	nd the DHRM Policy Number 1.75
	this Agreement may subject me to dure VDOT and COV work, and leg	liscipline which might include, but is not all liability.	ot limited to, removal from current
	nt is severable. If any administrative ons shall remain in full force and eff	e or judicial tribunal should find any pr fect.	ovision of this agreement to be
This Agreement shall be interpr	eted in accordance with the laws of	COV.	
I make this Agreement in good	faith, without mental reservation or	purpose of evasion.	
ACKNOWLEDGED:			
N. (D.: a)		Department	Links:
Name (Print)			<u>DHRM 1.75</u>
Signature		Date	IT Security Program Manual

Date